Case 15-01522-jw Doc 1 Filed 03/18/15 Entered 03/18/15 18:43:10 Desc Main Document Page 1 of 54

		s Bankru of South C			<u> </u>			Vol	untary	Petition
Name of Debtor (if individual, enter Last, F Ford, Delgar Sylvester	rst, Middle)	:		Name	of Joint De	ebtor (Spouse	(Last, First,	Middle):		
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):							Joint Debtor i trade names)		3 years	
Last four digits of Soc. Sec. or Individual-Ta (if more than one, state all)	xpayer I.D.	(ITIN)/Compl	ete EIN	Last for	our digits of	f Soc. Sec. or	Individual-T	`axpayer I.	D. (ITIN) N	lo./Complete EIN
Street Address of Debtor (No. and Street, Ci 850 South Harvin Street Sumter, SC	y, and State):	ZIP Code	Street	Address of	Joint Debtor	(No. and Str	eet, City, a	nd State):	ZIP Code
County of Residence or of the Principal Plac	of Rusines		9150	Count	y of Reside	nce or of the	Principal Pla	ce of Rusi	necc:	
Sumter	of busines	SS:		Count	y of Reside	nce of of the	rinicipai ria	ce of Bush	ness.	
Mailing Address of Debtor (if different from	street addre	ss):		Mailin	g Address	of Joint Debt	or (if differer	it from stre	eet address):	
			ZIP Code	_						ZIP Code
Location of Principal Assets of Business Del (if different from street address above):	tor			<u> </u>						
Type of Debtor		Nature of					of Bankrup Petition is Fi			ch
(Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) (Check one box) □ Health Care Business □ Single Asset Real Estate as in 11 U.S.C. § 101 (51B) □ Railroad □ Stockbroker □ Clearing Bank □ Other			defined	☐ Chapte ☐ Chapte ☐ Chapte ☐ Chapte ☐ Chapte	er 7 er 9 er 11 er 12	☐ Ch of ☐ Ch of	napter 15 Po a Foreign I napter 15 Po	etition for F Main Procee etition for F Nonmain Pr	eding Recognition	
Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:	☐ Deb	Tax-Exem (Check box, into the start at the s	f applicable npt organiza e United Sta	ation ates	defined "incurr		(Check onsumer debts, § 101(8) as idual primarily	one box)		s are primarily ness debts.
		le (the Internal F			a perso		household pur	-		
Filing Fee (Check one Full Filing Fee attached Filing Fee to be paid in installments (applicable attach signed application for the court's conside debtor is unable to pay fee except in installments Form 3A. Filing Fee waiver requested (applicable to chatact attach signed application for the court's consideration)	to individua ration certify ts. Rule 1006 ter 7 individu	ing that the (b). See Official als only). Must	Check at Check at A	ebtor is a sn ebtor is not f: ebtor's aggr re less than S Il applicable plan is beir cceptances of	egate noncor 62,490,925 (as boxes: ag filed with of the plan w	debtor as definess debtor as contingent liquidamount subject this petition.		C. § 101(51E J.S.C. § 101(luding debts on 4/01/16 o	51D). s owed to inside	ders or affiliates) ee years thereafter). reditors,
Statistical/Administrative Information ■ Debtor estimates that funds will be availa □ Debtor estimates that, after any exempt p	operty is ex	cluded and ad	ecured creation	ditors.		.C. § 1126(b).	THIS	SPACE IS I	FOR COURT	USE ONLY
there will be no funds available for distri Estimated Number of Creditors	oution to un	secured credite	ors.				-			
1- 50- 100- 200- 49 99 199 999	1,000- 5,000	5,001-	10,001-	25,001- 50,000	50,001- 100,000	OVER 100,000				
Estimated Assets	\$1,000,001 to \$10 million	\$10,000,001 S to \$50 t	\$50,000,001 to \$100	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion	More than \$1 billion				
Estimated Liabilities	\$1,000,001 to \$10 million	\$10,000,001 S to \$50 t	\$50,000,001 to \$100	\$100,000,001 to \$500 million	\$500,000,001 to \$1 billion					

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B1 (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Ford, Delgar Sylvester (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ Ben Mathews, Partner, UpRight LaMarch 18, 2015 Signature of Attorney for Debtor(s) Ben Mathews, Partner, UpRight Law Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

B1 (Official Form 1)(04/13)

Page 3

Voluntary	Petition
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(This page must be completed and filed in every case)

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Delgar Sylvester Ford

Signature of Debtor Delgar Sylvester Ford

X.

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

March 18, 2015

Date

Signature of Attorney*

X /s/ Ben Mathews, Partner, UpRight Law

Signature of Attorney for Debtor(s)

Ben Mathews, Partner, UpRight Law

Printed Name of Attorney for Debtor(s)

UpRight Law LLC

Firm Name

3406 West Avenue Columbia, SC 29203

Address

notices@uprightlaw.com, benrusmat@gmail.com 855-466-3920 Fax: 888-751-4932

Telephone Number

March 18, 2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

 \mathbf{X}

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Ford, Delgar Sylvester

Signatures

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

X

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

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B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court District of South Carolina

		21511101 01 500011 01110		
In re	Delgar Sylvester Ford		Case No.	
		Debtor(s)	Chapter	13

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

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B 1D (Official Form 1, Exhibit D) (12/09) - Cont.	Page 2
mental deficiency so as to be incapable of reafinancial responsibilities.); □ Disability. (Defined in 11 U.S.C. §	§ 109(h)(4) as impaired by reason of mental illness or alizing and making rational decisions with respect to 109(h)(4) as physically impaired to the extent of being in a credit counseling briefing in person, by telephone, or ombat zone.
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	administrator has determined that the credit counseling this district.
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Delgar Sylvester Ford
	Delgar Sylvester Ford
Date: March 18, 2015	

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B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy CourtDistrict of South Carolina

In re	Delgar Sylvester Ford		Case No	
-		Debtor		
			Chapter	13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	59,834.00		
B - Personal Property	Yes	4	58,788.02		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		83,709.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	2		26,822.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			6,235.77
J - Current Expenditures of Individual Debtor(s)	Yes	2			2,907.04
Total Number of Sheets of ALL Schedu	ıles	18			
	T	otal Assets	118,622.02		
			Total Liabilities	110,531.00	

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B 6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court District of South Carolina

In re	Delgar Sylvester Ford		Case No.	
-		Debtor		
			Chapter	13

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

State the following:

Average Income (from Schedule I, Line 12)	6,235.77
Average Expenses (from Schedule J, Line 22)	2,907.04
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	5,555.78

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		9,731.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		26,822.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		36,553.00

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B6A (Official Form 6A) (12/07)

In re	Delgar Sylvester Ford	Case No	
-		, D. I.	
		Debtor	

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

mily Home located at 850 South Harvin unter. SC 29150	Fee simple	-	59,834.00	0.00
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

Sub-Total > **59,834.00** (Total of this page)

Total > **59,834.00**

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

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B6B (Official Form 6B) (12/07)

In re	Delgar Sylvester Ford	Case N	0
· <u>-</u>		Debtor	

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
1.	Cash on hand	CASH	-	50.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	NBSC Personal Savings Account Last 4 of Account Number: 5220	-	3.02
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	Various used household goods and furnishings Location: 850 S Harvin St, Sumter, SC 29150	-	2,000.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	Various books, family photos, and home decor Location: 850 S Harvin St, Sumter, SC 29150	-	150.00
6.	Wearing apparel.	Used wearing apparel Location: 850 S Harvin St, Sumter, SC 29150	-	250.00
7.	Furs and jewelry.	x		
8.	Firearms and sports, photographic,	Shotgun	-	200.00
	and other hobby equipment.	4 fishing rods & reels and fishing tackle	-	100.00
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	x		
10.	Annuities. Itemize and name each issuer.	x		
			Sub-Tota	al > 2,753.02

3 continuation sheets attached to the Schedule of Personal Property

(Total of this page)

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B6B (Official Form 6B) (12/07) - Cont.

In	re Delgar Sylvester Ford			Case No.	
			Debtor		
	,	SC	HEDULE B - PERSONAL PROPEI (Continuation Sheet)	RTY	
	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
2.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
3.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
4.	Interests in partnerships or joint ventures. Itemize.	X			
5.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
6.	Accounts receivable.	X			
7.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
8.	Other liquidated debts owed to debtor including tax refunds. Give particulars.		Anticipated 2014 Tax Refund	-	610.00
9.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
0.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
1.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
				Sub-Tota	al > 610.00

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Total of this page)

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B6B (Official Form 6B) (12/07) - Cont.

In re	Delgar Sylvester Ford	Case No

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	X			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	х			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		1999 Lincoln Navigator 4WD Mileage: 138k Value based on nadaguides.com	-	2,175.00
			2014 Ford Mustang Coupe 2D GT V8 Mileage: 15k Value based on nadaguides.com VIN:1ZVBP8CF0E5318470	-	25,700.00
			2014 Ford Mustang Coupe 2D GT V8 Mileage: 7k Value based on nadaguides.com VIN: 1ZVBP8CF0E5318476	-	25,700.00
			2001 Chevrolet Metro Mileage: 270k Value based on nadaguides.com	-	1,200.00
26.	Boats, motors, and accessories.		1995 Glassmaster 15' boat with a trailer and a 1995 40hp Mercury outboard motor	-	650.00
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.	X			
			(Total	Sub-Total of this page)	al > 55,425.00

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

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B6B (Official Form 6B) (12/07) - Cont.

In re	Delgar Sylvester Ford		Case No.	
•		Debtor	-,	

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.	X			

0.00 Sub-Total > (Total of this page) 58,788.02

Total >

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B6C (Official Form 6C) (4/13)

In re	Delgar Sylvester Ford	Case No	
		,	

Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under: (Check one box) ☐ 11 U.S.C. §522(b)(2) ☐ 11 U.S.C. §522(b)(3)		if debtor claims a homestead exe 75. (Amount subject to adjustment on 4/1. with respect to cases commenced on	/16, and every three years thereafte
	 _	 Value of	Current Value of

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Real Property Single-Family Home located at 850 South Harvin Street, Sumter, SC 29150	S.C. Code Ann. § 15-41-30(A)(1) S.C. Code Ann. § 15-41-30(A)(7) Unused portion of § 15-41-30(A)(2)	58,225.00 1,609.00	59,834.00
Cash on Hand CASH	S.C. Code Ann. § 15-41-30(A)(7) Unused portion of § 15-41-30(A)(2)	50.00	50.00
Checking, Savings, or Other Financial Accounts, C NBSC Personal Savings Account Last 4 of Account Number: 5220	ertificates of Deposit S.C. Code Ann. § 15-41-30(A)(7) Unused portion of § 15-41-30(A)(2)	3.02	3.02
Books, Pictures and Other Art Objects; Collectibles Various books, family photos, and home decor Location: 850 S Harvin St, Sumter, SC 29150	S.C. Code Ann. § 15-41-30(A)(3)	150.00	150.00
Wearing Apparel Used wearing apparel Location: 850 S Harvin St, Sumter, SC 29150	S.C. Code Ann. § 15-41-30(A)(3)	250.00	250.00
Firearms and Sports, Photographic and Other Hob Shotgun	by Equipment S.C. Code Ann. § 15-41-30(A)(3)	200.00	200.00
4 fishing rods & reels and fishing tackle	S.C. Code Ann. § 15-41-30(A)(7) Unused portion of § 15-41-30(A)(2)	100.00	100.00
Other Liquidated Debts Owing Debtor Including Ta Anticipated 2014 Tax Refund	<u>x Refund</u> S.C. Code Ann. § 15-41-30(A)(7) Unused portion of § 15-41-30(A)(2)	610.00	610.00
Automobiles, Trucks, Trailers, and Other Vehicles 1999 Lincoln Navigator 4WD Mileage: 138k Value based on nadaguides.com	S.C. Code Ann. § 15-41-30(A)(2)	1,425.00	2,175.00
2001 Chevrolet Metro Mileage: 270k Value based on nadaguides.com	S.C. Code Ann. § 15-41-30(A)(7) Unused portion of § 15-41-30(A)(2)	450.00	1,200.00
Boats, Motors and Accessories 1995 Glassmaster 15' boat with a trailer and a 1995 40hp Mercury outboard motor	S.C. Code Ann. § 15-41-30(A)(7) Unused portion of § 15-41-30(A)(2)	650.00	650.00

Total:	63.722.02	65.222.02

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B6D (Official Form 6D) (12/07)

In re	Delgar Sylvester Ford	Case No.
-		Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	1	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTLNGENT	UNLIQUIDAT	SPUTE	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 10141954037402428 American General Financial/Springleaf Fi Attention: Bankruptcy Po Box 3251 Evansville, IN 47731		-	Opened 10/01/14 Last Active 1/30/15 Non-Purchase Money Security Various used household goods and furnishings Location: 850 S Harvin St, Sumter, SC 29150	Т	T E D			
	┸		Value \$ 2,000.00				8,728.00	8,728.00
Account No. 30000138742001000 Santander Consumer Usa Po Box 961245 Ft Worth, TX 76161		-	Opened 8/01/14 Last Active 2/02/15 Auto Loan 2014 Ford Mustang Coupe 2D GT V8 Mileage: 15k Value based on nadaguides.com VIN:1ZVBP8CF0E5318470 Value \$ 25.700.00				42.047.00	0.00
Account No. 1878	╁	+	Value \$ 25,700.00 Non-Purchase Money Security				43,947.00	0.00
Sumter Financial Services 1224-G Alice Drive Sumter, SC 29150		-	1999 Lincoln Navigator 4WD Mileage: 138k Value based on nadaguides.com					
			Value \$ 2,175.00	1			750.00	0.00
Account No. 1878 Sumter Financial Services 1224-G Alice Drive Sumter, SC 29150		-	Non-Purchase Money Security 2001 Chevrolet Metro Mileage: 270k Value based on nadaguides.com					
			Value \$ 1,200.00	\dashv			750.00	0.00
continuation sheets attached Subtotal (Total of this page) 54,175.00 8,728.00								

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 $B6D\ (Official\ Form\ 6D)\ (12/07)$ - Cont.

In re	Delgar Sylvester Ford	Case No.	
_		Debtor	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBLOK	H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COXT_ZGEZ	UNLIQUIDAE	SPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. 45745701066740001			Opened 8/01/14 Last Active 2/02/15	Т	A T E D			
Wff Auto Po Box 29704 Phoenix, AZ 85038		-	Auto Loan 2014 Ford Mustang Coupe 2D GT V8 Mileage: 7k Value based on nadaguides.com VIN: 1ZVBP8CF0E5318476		D			
			Value \$ 25,700.00				28,531.00	0.00
Account No. xxxxxxx8001			Opened 10/01/14 Last Active 2/28/15					
World Fin World Acceptance Corp/Attn Bankruptcy Po Box 6429 Greenville, SC 29606		-	Non-Purchase Money Security Various used household goods and furnishings Location: 850 S Harvin St, Sumter, SC 29150					
Greenvine, 30 23000			Value \$ 2,000.00				1,003.00	1,003.00
			Value \$					
Account No.			Value \$					
Account No.			Value \$					
Sheet 1 of 1 continuation sheets attact Schedule of Creditors Holding Secured Claims	hed	d to	(Total of	Sub this			29,534.00	1,003.00
			(Report on Summary of S		Γota lule		83,709.00	9,731.00

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B6E (Official Form 6E) (4/13)

In re	Delgar Sylvester Ford	Case No.	
_		Debtor ,	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be

liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated."
"Disputed." (You may need to place an "X" in more than one of these three columns.) Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.
Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priorit listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. $\$$ 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
■ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B6E (Official Form 6E) (4/13) - Cont.

In re	Delgar Sylvester Ford			Case No.
_		Debtor	,	

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community CONTINGENT UZLIQUIDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, S P U T E D AND MAILING ADDRESS Н **AMOUNT** DATE CLAIM WAS INCURRED W INCLUDING ZIP CODE, AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) NOTICE ONLY Account No. **IRS** Unknown P.O. Box 7346 Philadelphia, PA 19101-7346 Unknown Unknown NOTICE ONLY Account No. **South Carolia Department of Revenue** Unknown 300A Outlet Pointe Boulevard Columbia, SC 29210 Unknown Unknown Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims (Total of this page) 0.00 0.00 Total 0.00 (Report on Summary of Schedules) 0.00 0.00

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R6F (Official.	Form	6F)	(12/07)

In re	Delgar Sylvester Ford		Case No.	
-		Debtor	,	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	СО	Hu	sband, Wife, Joint, or Community	č	Ü	D		
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODEBTOR	H W J C		CONTINGENT	U_GD_D	SPUTED) 	AMOUNT OF CLAIM
Account No. 2827			Loan	Ť	A T E D			
Cash Central PO Box 6430□□ Logan, UT 84341		-			D			497.00
Account No. 8716			Loan			T	1	
CashNet USA 200 W. Jackson Bld Chicago, IL 60606		-						1,000.00
Account No. xxx9610		\vdash	Opened 3/01/13 Last Active 3/03/15			╀	+	1,000.00
Hccredit/feb Po Box 829 Springdale, AR 72765		-	Credit Card					1,151.00
Account No. xxxxxxxxxxx4438		П	Opened 12/01/14 Last Active 2/02/15			T	1	
Onemain 6801 Colwell Blvd Irving, TX 75039		-	Unsecured					23,048.00
		Ш	<u> </u>	Subt	ota	L I	+	
continuation sheets attached			(Total of t)	25,696.00

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B6F (Official Form 6F) (12/07) - Cont.

In re	Delgar Sylvester Ford	Case No.	
-		Debtor ,	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

	١.			1.	1		
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	Hu H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COXHLXGEX	UNLIQUIDATE	SPUTE	AMOUNT OF CLAIM
Account No. 1852			Collection	Т	E D		
Quick Credit 810 Broad St Suite 7 Sumter, SC 29150		_					105.00
Account No. xxx3949	t		Opened 3/01/11	+	H	H	
RMC Po Box 50685 Columbia, SC 29250		_	Collection Attorney Palmetto Infectious Disease				
							306.00
Account No. xxx8619 RMC Po Box 50685 Columbia, SC 29250		_	Opened 5/01/10 Collection Attorney Stokes Eye Center				
Columbia, GO 23230							50.00
Account No. xxxx3309 United Direct Finance 865 Bassett Rd Westlake, OH 44145		_	Opened 7/01/12 Last Active 2/01/15 Installment Sales Contract				665.00
Account No.							
Sheet no1 of _1 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			1,126.00
			(Report on Summary of S		Tota lule		26,822.00

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B6G (Official Form 6G) (12/07)

In re	Delgar Sylvester Ford	Case No
_		Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.

State whether lease is for nonresidential real property.

State contract number of any government contract.

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B6H (Official Form 6H) (12/07)

In re	Delgar Sylvester Ford	Case No	
-		Debtor	

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

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Fill	in this information to identify your c	ase:				Ī			
	otor 1 Delgar Sylve								
	otor 2 use, if filing)								
Uni	ted States Bankruptcy Court for the	: DISTRICT OF SOUTI	H CAROLINA						
(If kr	se number		-			Check if this is An amende A supplem 13 income	ed filing ent showing	post-petitior lowing date:	n chapter
-	fficial Form B 6I					MM / DD/ Y	/YYY		
	chedule I: Your Inc		onle are filing togeth	er (Debt	or 1	and Debtor 2) bo	th are equa	lly respons	12/13
sup spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not fili or spouse is not filing w	ng jointly, and your ith you, do not inclu	spouse i de infori	s liv nati	ing with you, incl on about your sp	ude inform ouse. If mo	ation about e space is i	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor :	2 or non-fili	ng spouse	
	If you have more than one job,	Employment status	☐ Employed			☐ Empl	☐ Employed		
	attach a separate page with information about additional	zmproymont otatae	■ Not employed			■ Not e	■ Not employed		
	employers.	Occupation	Retired			Retired	Retired		
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Par	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any	line, write \$0 in the	space. Incl	ude your nor	n-filing
-	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	n for all e	emple	oyers for that perso	on on the lin	es below. If y	ou need
						For Debtor 1	For Deb	tor 2 or g spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	0.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	0.00	\$	0.00	

Official Form B 6I Schedule I: Your Income page 1

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Deb	tor 1	Delgar Sylvester Ford	-	Case	e number (if known)			
	Сор	by line 4 here	4.	Fo \$	r Debtor 1		Debtor 2 or -filing spouse 0.00	
5.	l ist	all payroll deductions:		_				
3.	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.+	\$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 0.00 0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	0.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	0.00	
9.	8a. 8b. 8c. 8d. 8e. 8f.	Net income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: Veterans Benefits Retirement Annuity	8c. 8d. 8e. 8f. 8g. 8h.+	\$	2,174.22	* * * * * * * * * * * * * * * * * * * *	0.00 0.00 0.00 0.00 488.67	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	»	5,747.10	<u></u>	488.67	
10.		culate monthly income. Add line 7 + line 9. I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		5,747.10 + \$_	4	= \$ <u>6</u> ,	235.77
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depend				Schedule J. 11. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The restee that amount on the Summary of Schedules and Statistical Summary of Certain lies					12. \$ 6 ,	235.77
13.	Do y	you expect an increase or decrease within the year after you file this form' No.	?				Combined monthly in	

Official Form B 6I Schedule I: Your Income page 2

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-: 11	in this informat	tion to identify ye	N. I						
	in triis informat	tion to identify yo	our case.						
Deb	tor 1	Delgar Sylve	ster Ford	d		Che	eck if this is:		
							An amended filing		
	tor 2							ving post-petition chapte	r
(Spc	ouse, if filing)						13 expenses as of	the following date:	
Unit	ed States Bankri	uptcy Court for the:	DISTRI	CT OF SOUTH CAROLINA	Α		MM / DD / YYYY		
Cas	e numbe r						A separate filing for	Debtor 2 because Deb	tor
(If kr	nown)						2 maintains a sepa	rate household	
Sc	as complete a	J: Your I	possible.	ISES If two married people ar				r supplying correct	/13
		n). Answer ever			orm. On the top of	arry addit	ionai pages, write y	our name and case	
Par 1.	Is this a join	ibe Your House	hold						
١.	_								
	No. Go to								
	☐ Yes. Doe s	s Debtor 2 live i	n a separa	ate household?					
	□ Ye	es. Debtor 2 mus	st file a sep	arate Schedule J.					
2.	Do you have	e dependents?	■ No						
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not state	the						☐ No	
	dependents'	names.						Yes	
								□ No	
								Yes	
								□ No	
								☐ Yes	
								□ No	
3.	Do your eyn	enses include	_		-			☐ Yes	
٥.		f people other the	han	No					
		d your depende		Yes					
Dor	t 2: Estim	ate Your Ongoi	na Manthi	v Evnancas					
Par				y Expenses uptcy filing date unless y	ou are using this fo	orm as a s	upplement in a Cha	pter 13 case to report	_
exp				y is filed. If this is a supp					
Incl	luda avnanca	e naid for with r	non-cash	government assistance it	f vou know				
	•	•		sluded it on <i>Schedule I:</i> Y	•				
	ficial Form 6l.						Your expe	enses	
,	The newtel e		la: '			_			
4.		r nome owners and any rent for the		ses for your residence. In	nclude first mortgage	e 4.	\$	0.00	
	paymonto an	id dily form for the	o ground o	1 100					
	If not includ	ed in line 4:							
		state taxes				4a.		28.00	
	•	rty, homeowner's				4b.	<u> </u>	46.66	
				ipkeep expenses		4c.	<u> </u>	100.00	
5.		owner's associat		our residence, such as ho	me equity loans	4d. 5.	\$	0.00	
٥.	, wantional ii	gage payine	ioi yc	a. roomaciioo, sucii as ilu	ino oquity idalis	J.	Ψ	0.00	

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er Ford	Case num	ber (if known)	
atural gas	6a.	\$	375.00
•	6b.	\$	70.00
one, Internet, satellite, and cable services	6c.	\$	186.00
	6d.	\$	100.00
	7.	\$	607.00
•	8.	\$	0.00
		·	200.00
· ·		· —	100.00
		·	100.00
		·	100.00
	12.	\$	395.00
ecreation, newspapers, magazines, and books	13.	\$	100.00
s and religious donations	14.	\$	120.00
		1	
deducted from your pay or included in lines 4 or 20.			
		· —	7.38
	15b.	\$	0.00
	15c.	\$	372.00
	15d.	\$	0.00
xes deducted from your pay or included in lines 4 or 20.			
	16.	\$	0.00
		•	
		· —	0.00
√ehicle 2		·	0.00
		·	0.00
		\$	0.00
		¢	0.00
	ı) . 10.	¢	
ake to support others who do not live with you.	10	Ψ	0.00
senses not included in lines 4 or 5 of this form or on		our Income	
			0.00
property		·	0.00
ner's or renter's insurance		·	0.00
		·	0.00
		·	0.00
ociation of condominatin dues		· . 	
		+φ	0.00
s. Add lines 4 through 21.	22.	\$	2,907.04
y expenses.			
	23a.	\$	6,235.77
expenses from line 22 above.	23b.	-\$	2,907.04
	22-	¢	3,328.73
monthly net income.	∠3C.	Ψ	3,320.13
ase or decrease in your expenses within the year aft	ter you file this	form?	
to finish paying for your car loan within the year or do you expecyour mortgage?		payment to increase	or decrease because of a
to finish paying for your car loan within the year or do you expec		payment to increase	or decrease because of a
	y on line 5, Schedule I, Your Income (Official Form 6 ake to support others who do not live with you. Denses not included in lines 4 or 5 of this form or oner property Incomer's, or renter's insurance air, and upkeep expenses ociation or condominium dues S. Add lines 4 through 21. Ity expenses. In ret income. In combined monthly income) from Schedule I. Ity expenses from line 22 above. In this expenses from your monthly income. In monthly net income.	atural gas bage collection cone, Internet, satellite, and cable services Cell Phones g supplies 's education costs dry cleaning s and services lenses gas, maintenance, bus or train fare. ents. ecreation, newspapers, magazines, and books las and religious donations ededucted from your pay or included in lines 4 or 20. Specify: Interpretation only, maintenance, and support that you did not report as yon line 5, Schedule I, Your Income (Official Form 6I). ake to support others who do not live with you. Interpretation or condominium dues Services Services Interpretation Interpretat	atural gas bage collection 6b. \$ cone, Internet, satellite, and cable services 6c. \$ CCEII Phones 6d. \$ groupplies 7. \$ groupplies 7. \$ groupplies 8. \$ groupplies 9. \$ groupp

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B6 Declaration (Official Form 6 - Declaration). (12/07)

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United States Bankruptcy CourtDistrict of South Carolina

In re	Delgar Sylvester Ford	Case No.		
		Debtor(s)	Chapter	13

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERIURY BY INDIVIDUAL DEBTOR

	DECEARATION UNDER LENALTY OF TERSORY BY INDIVIDUAL DEBTOR					
	I declare under penalty of perjury that I have read the foregoing summary and schedules sheets, and that they are true and correct to the best of my knowledge, information, and belief.					
Date	March 18, 2015	Signature	/s/ Delgar Sylvester Ford Delgar Sylvester Ford Debtor			

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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B7 (Official Form 7) (04/13)

United States Bankruptcy Court District of South Carolina

In re	Delgar Sylvester Ford			
		Debtor(s)	Chapter	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE
\$9,902.34 2015 YTD: Debtor Veterans Benefits
\$6,765.00 2015 YTD: Debtor Retirement Annuity
\$816.30 2015 YTD: Debtor SSI Benefits
\$26,616.00 2014: Debtor Pension/Annuities

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AMOUNT SOURCE

\$9.072.00 2014: Both SSI Benefits

\$26,232.00 2013: Debtor Pension/Annuities

2013: Debtor SSI Benefits \$3,103.00

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR Santander Consumer Usa Po Box 961245 Ft Worth, TX 76161	DATES OF PAYMENTS 01/2015 02/2015 3/2015	AMOUNT PAID \$2,684.01	AMOUNT STILL OWING \$43,947.00
Wff Auto	01/2015	\$1,819.80	\$28,531.00
Po Box 29704	02/2015		
Phoenix, AZ 85038	03/2015		

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT DATES OF PAID OR PAYMENTS/ AMOUNT STILL VALUE OF NAME AND ADDRESS OF CREDITOR **TRANSFERS OWING TRANSFERS**

None

c. All debtors: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL **OWING**

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT COURT OR AGENCY NATURE OF STATUS OR AND CASE NUMBER **PROCEEDING** AND LOCATION DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

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9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Chicago, IL 60603

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

Advisory Credit Management 3511 West Commercial Blvd. Suite 404

03/03/2015

\$48.00 Single Filer Credit Counseling

Fort Lauderdale, FL 33309

UpRightLaw 02/2015 79 W. Monroe, 5th Floor

\$2160 (\$1800 attny fees, \$310 filing fee, \$50 credit report)

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE. RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

Wells Fargo 1 Home campus, 3rd FI Des Moines, IA 50328

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE **Checking and Savings** \$0 final balance

\$3,300.00 taken out at closing 2/27/2015

AMOUNT AND DATE OF SALE

OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

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13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

Mary H McKnight

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF **GOVERNMENTAL UNIT**

DATE OF NOTICE

ENVIRONMENTAL

LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

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NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND

, ,

NATURE OF BUSINESS

ENDING DATES

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

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20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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B7 (Official Form 7) (04/13)

8

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date March 18, 2015 Signature // Signature Delgar Sylvester Ford
Delgar Sylvester Ford
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

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United States Bankruptcy Court District of South Carolina

In r	e Delgar Sylvest	er Ford		Case No.	
1111	Deigai Sylvest	GI I UIU	Debtor(s)	Chapter	13
	DIS	CLOSURE OF COMP	ENSATION OF ATTOR	RNEY FOR DE	EBTOR(S)
1.	paid to me within one	year before the filing of the per	2016(b), I certify that I am the atto cition in bankruptcy, or agreed to be ection with the bankruptcy case is	e paid to me, for serv	amed debtor and that compensation rices rendered or to be rendered on
	For legal service	es, I have agreed to accept		\$ <u></u>	3,500.00
			ed		1,800.00
	Balance Due			\$	1,700.00
2.	The source of the con	npensation paid to me was:			
	Debtor	☐ Other (specify):			
3.	The source of compen	nsation to be paid to me is:			
	Debtor	☐ Other (specify):			
4.	■ I have not agreed	to share the above-disclosed co	mpensation with any other person	unless they are members	bers and associates of my law firm.
			ensation with a person or persons w names of the people sharing in the		
5.	In return for the above	ve-disclosed fee, I have agreed to	render legal service for all aspect	s of the bankruptcy c	ase, including:
	b. Preparation and fic. Representation of	ling of any petition, schedules, s the debtor at the meeting of cre	ndering advice to the debtor in dete statement of affairs and plan which ditors and confirmation hearing, ar	may be required;	
	reaffirmati	ns with secured creditors t	o reduce to market value; exe tions as needed; preparation household goods.		
6.	Represent	e debtor(s), the above-disclosed ation of the debtors in any adversary proceeding.	fee does not include the following dischargeability actions, judio	service: cial lien avoidance	es, relief from stay actions or
			CERTIFICATION		
this	I certify that the foreg bankruptcy proceeding		any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
Date	ed: March 18, 201	5	/s/ Ben Mathews,		
				rtner, UpRight La	w
			UpRight Law LLC 3406 West Avenu		
			Columbia, SC 292	203	
			855-466-3920 Fa	x: 888-751-4932 aw.com, benrusm	nat@amail.com
			nonces@uprignu	aw.com, bemusii	iat@giiiaii.coiii

UNITED STATES BANKRUPTCY COURT DISTRICT OF SOUTH CAROLINA

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a joint case (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

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Form B 201A, Notice to Consumer Debtor(s)

Page 2

Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

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B 201B (Form 201B) (12/09)

United States Bankruptcy Court District of South Carolina

	Distr	ict of South Carolina			
In re	Delgar Sylvester Ford		Case No.		
		Debtor(s)	Chapter	13	
	CERTIFICATION OF N UNDER § 342(b) C	OTICE TO CONSUM OF THE BANKRUPT		R(S)	
Code.	Cert I (We), the debtor(s), affirm that I (we) have received	tification of Debtor ved and read the attached r	notice, as required	by § 342(b) of the Bankruptcy	
Delga	r Sylvester Ford	χ /s/ Delgar Syl	vester Ford	March 18, 2015	
Printe	d Name(s) of Debtor(s)	Signature of D	Debtor	Date	_
Case 1	No. (if known)	X			
		Signature of J	oint Debtor (if any) Date	

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

LOCAL OFFICIAL FORM 1007-1(b) TO SC LBR 1007-1

United States Bankruptcy CourtDistrict of South Carolina

In re	Delgar Sylvester Ford		Case No.	
		Debtor(s)	Chapter	13
	CERTIFICATIO	ON VERIFYING CREDITOR	MATRIX	
CM/E0	The above named debtor, or attorney for aptrox Rule 1007-1 that the master mailing CF, or conventionally filed in a typed hard action to, the debtor's schedules, statements and	list of creditors submitted either on l copy scannable format which has	computer d been comp	liskette, electronically filed via ared to, and contains identical
	Master mailing list of creditors submitted vi	ia:		
	(a) computer diskette			
	(b) scannable hard copy (number of sheets submitted			
	(c) X electronic version file	d via CM/ECF		
Date:	March 18, 2015	/s/ Delgar Sylvester Ford		
		Delgar Sylvester Ford		
		Signature of Debtor		
Date:	March 18, 2015	/s/ Ben Mathews, Partner, UpRight	Law	
		Signature of Attorney		<u> </u>
		Ben Mathews, Partner, UpRight La	w	
		UpRight Law LLC		

3406 West Avenue Columbia, SC 29203

District Court I.D. Number

855-466-3920 Fax: 888-751-4932Typed/Printed Name/Address/Telephone

AMERICAN GENERAL FINANCIAL/SPRINGLEAF FI ATTENTION: BANKRUPTCY PO BOX 3251 EVANSVILLE IN 47731

CASH CENTRAL PO BOX 6430□□ LOGAN UT 84341

CASHNET USA 200 W. JACKSON BLD CHICAGO IL 60606

HCCREDIT/FEB PO BOX 829 SPRINGDALE AR 72765

IRS
P.O. BOX 7346
PHILADELPHIA PA 19101-7346

ONEMAIN 6801 COLWELL BLVD IRVING TX 75039

QUICK CREDIT 810 BROAD ST SUITE 7 SUMTER SC 29150

RMC PO BOX 50685 COLUMBIA SC 29250

RMC
PO BOX 50685
COLUMBIA SC 29250

SANTANDER CONSUMER USA PO BOX 961245 FT WORTH TX 76161

SOUTH CAROLIA DEPARTMENT OF REVENUE 300A OUTLET POINTE BOULEVARD COLUMBIA SC 29210

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SUMTER FINANCIAL SERVICES 1224-G ALICE DRIVE SUMTER SC 29150

SUMTER FINANCIAL SERVICES 1224-G ALICE DRIVE SUMTER SC 29150

UNITED DIRECT FINANCE 865 BASSETT RD WESTLAKE OH 44145

WFF AUTO
PO BOX 29704
PHOENIX AZ 85038

WORLD FIN
WORLD ACCEPTANCE CORP/ATTN BANKRUPTCY
PO BOX 6429
GREENVILLE SC 29606

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Fill in this inforr	Fill in this information to identify your case:					
Debtor 1	Delgar Sylvester Ford					
Debtor 2 (Spouse, if filing)						
United States Bankruptcy Court for the: District of South Carolina						
Case number _ (if known)						

k as directed in lines 17 and 21:
cording to the calculations required by this tement:
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
3. The commitment period is 3 years.
4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 22C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

you have nothing to report for any line, write \$0 in the spa	ce.						
				Column / Debtor 1		Column Debtor non-fili	
Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and co	mmissi	ons (before all	\$	0.00	\$	0.00
 Alimony and maintenance payments. Do not include Column B is filled in. 	payme	nts from	a spouse if	\$	0.00	\$	0.00
4. All amounts from any source which are regularly portion of you or your dependents, including child support from an unmarried partner, members of your household and roommates. Include regular contributions from a spilled in. Do not include payments you listed on line 3.	Includ	e regula depende	r contributions ents, parents,	\$	0.00	\$	0.00
5. Net income from operating a business, profession,	or farn	n					
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	-\$_	0.00					
Net monthly income from a business, profession, or far	m \$ _	0.00	Copy here ->	\$	0.00	\$	0.00
6. Net income from rental and other real property							
Gross receipts (before all deductions)	\$	0.00					
Ordinary and necessary operating expenses	-\$	0.00					
Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	0.00

Official Form 22C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c. 10a. \$ 0.00 \$ 0.0 10b. \$ 0.00 \$ 0.0 10c. Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 22. Copy your total average monthly income from line 11. 33. Calculate the marital adjustment. Check one: You are not married. Fill in 0 on line 3d. You are married and your spouse is filling with you. Fill in 0 in line 13d. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of yor dependents, such as payment of the spouse's support of someone other than you or your dept of dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dept of the spouse's support of someone other than you or your dept of the spouse's tax liability or the spouse's support of someone other than you or your dept of the spouse's tax liability or the spouse's support of someone other than you or your dept of the spouse's tax liability or the spouse's support of someone other than you or your dept of the spouse's tax liability or the spouse's support of someone other than you or your dept of the spouse's support of someone other than you or your dept of the spouse's su	Debtor 1 Delga	ar Sylvester Ford		Case nu	ımber (<i>if known</i>)			_
7. Interest, dividends, and royalties 8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefit under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic brotism. If necessary, list other sources on a separate page and put the total on line 10c. 10a. \$ 0.00 \$ 0.00 10b. \$ 0.00 \$ 0.00 10c. Total amounts from separate pages, if any. \$ 0.00 \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 12. Copy your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 13. Calculate the marital adjustment. Check one: 14. You are married and your spouse is filing with you. Fill in 0 in line 13d. 15. Calculate the marital adjustment. Check one: 16. You are married and your spouse is filing with you. 17. Fill in the amount of the income listed in line 1, Column B, that was NOT regularly paid for the household expenses of you dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse'						Debtor 2 or	pouse	
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you \$ 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c. 10a. \$ 0.00 \$ 0.0 10c. Total amounts from separate pages, if any. \$ 0.00 \$ 0.0 11c. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. Part 2: Determine How to Measure Your Deductions from Income 12. Copy your total average monthly income from line 11. \$ 5,555.78 \$ 0.00 \$ 0.00 13. Calculate the marital adjustment. Check one: 14. You are married and your spouse is not filing with you. Fill in 0 in line 13d. 15. Calculate the amount of the income listed in line 11, Clumn B, that was NOT regularly paid for the household expenses of yor dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents and the amount of income devoted to each purpose. If necessar adjustments on a separate page. 15. If this adjustment does not apply, enter 0 on line 13d. 13a. \$ 0.00 Copy here>> 13d 13d. 13b. \$ 0.00 Copy here>> 13d 13d. 14. Your current monthly income. Subtract line 13d from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 15a. Copy line 14 here> 15a. C	7. Interest, di	vidends, and royalties		\$	0.00	\$	0.00	
the Social Security Act. Instead, list it here: For you For your spouse \$ 0.00 Per Person or retirement income. Do not include any amount received that was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefit under the Social Security Act or payments received as a victim of a war crime, a crime against humanity. or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c. 10a. 10b. 10c. Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 12. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: 12. You are married and your spouse is not filing with you. 13. In the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of yor dependents, such as payment of the spouses is tax liability or the spouse's support of someone other than you or your depending in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of yor dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your depending in line 313a-c, specify the basis for exoluding this income and the amount of income devoted to each purpose. If necessar adjustments on a separate page. 11. If this adjustment does not apply, enter 0 on line 13d. 12. Separate the adjustment of the spouse's tax liability or the spouse's support of someone other than you or your depending in the separate page. 13. Calculate your current monthly income for the year. Follow these steps: 15a. Copy line 14 heres> 15a. Copy line 14 heres>	•	•		\$	0.00	\$	0.00	
For your spouse \$ 0.00 Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. In necessary, list other sources on a separate page and put the total on line 10c. 10a. \$ 0.00 \$ 0.00 10b. \$ 0.00 \$ 0.00 10c. Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 12. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 on line 3d. You are married and your spouse is filing with you. Fill in 0 in line 13d. You are married and your spouse is thing with you. Fill in the amount of the income listed in line 11. Column B, that was NOT regularly paid for the household expenses of yor dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dept in lines 13a-c. Specify the basis for excluding this income and the amount of income devoted to each purpose. If necessar adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. 13a. 13b. 13c. 13d. Total 15a. Calculate your current monthly income. Subtract line 13d from line 12. 15a. Copy line 14 heres> Multiply line 15a by 12 (the number of months in a year).			as a benefit und	er				
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefit under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c. 10a. \$ 0.00 \$	For you	\$	0.00					
9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a wer crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c. 10a. \$ 0.00 \$ 0.0			0.00					
Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c. 10a. \$ 0.00 \$ 0.0 10b. \$ 0.00 \$ 0.0 10c. Total amounts from separate pages, if any. \$ 0.00 \$ 0.0 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. Part 2: Determine How to Measure Your Deductions from Income 12. Copy your total average monthly income from line 11. \$ 0.00 \$ 0.00 13. Calculate the marital adjustment. Check one: You are married and your spouse is filing with you. Fill in 0 in line 13d. 14. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11. Column B, that was NOT regularly paid for the household expenses of your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as a payment of the spouse	9. Pension or	r retirement income. Do not include any amount receive	ed that was a	\$	5,555.78	\$	0.00	
10b. Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 12. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 on line 3d. You are married and your spouse is filing with you. Fill in 0 in line 13d. You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of yor dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dept In lines 13a-c, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessar adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. 13a.	Do not inclu received as domestic te total on line	ude any benefits received under the Social Security Actors a victim of a war crime, a crime against humanity, or interrorism. If necessary, list other sources on a separate page.	or payments ternational or					
10c. Total amounts from separate pages, if any. 11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 12. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: 14. You are married and your spouse is filing with you. 15. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents adjustments on a separate page. 15. If this adjustment does not apply, enter 0 on line 13d. 13a. 13b. 13c. 13d. Total 15. Calculate your current monthly income. Subtract line 13d from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 15a. Copy line 14 here=> 15a. \$ Multiply line 15a by 12 (the number of months in a year).				\$		\$	0.00	
11. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. S				\$	0.00	\$	0.00	
Part 2: Determine How to Measure Your Deductions from Income 12. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 on line 3d. You are married and your spouse is filling with you. Fill in 0 in line 13d. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's state liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's state liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's sate liability or t	10c. To	tal amounts from separate pages, if any.	•	+ \$	0.00	\$	0.00	
12. Copy your total average monthly income from line 11. 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 on line 3d. You are married and your spouse is filing with you. Fill in 0 in line 13d. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of yor dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents on a separate page. If this adjustment does not apply, enter 0 on line 13d. 13a. 13b. 13c. +\$ 13d. Total \$ 0.00 Copy here=> 13d 14. Your current monthly income. Subtract line 13d from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year).	11. Calculate y each colum	rour total average monthly income. Add lines 2 through in. Then add the total for Column A to	gh 10 for nn B. \$	5,555.7	<u>*</u> * _	0.00	5,555.78 Total average	
13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 on line 3d. You are married and your spouse is filing with you. Fill in 0 in line 13d. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of yo dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your deper In lines 13a-c, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessar adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. 13a. 13b. 13c. 13d. Total \$ 0.00 Copy here=> 13d 14. Your current monthly income. Subtract line 13d from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year).	Part 2: Dete	ermine How to Measure Your Deductions from Incon	ne				monthly income	
You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of yo dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents of spouse's support of someone other than you or your dependents. If necessar adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. 13a.	13. Calculate t	the marital adjustment. Check one:					\$ 5,555.78	i
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Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of yo dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents, such as payment of the spouse's support of someone other than you or your dependents and you or you or you or you or your dependents and you or you or you or you or you or y	You ar	re married and your spouse is not filing with you.						
adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. 13a.	Fill in t	the amount of the income listed in line 11, Column B, that						
13a. \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$			the amount of in	come devo	oted to each p	ourpose. If nece	ssary, list additiona	
13b.	If this a	adjustment does not apply, enter 0 on line 13d.						
13c	_		\$					
13d. Total \$ 0.00 Copy here=> 13d 14. Your current monthly income. Subtract line 13d from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 15a. Copy line 14 here=> 15a. \$ Multiply line 15a by 12 (the number of months in a year).	_							
14. Your current monthly income. Subtract line 13d from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year).	130.		+ \$ _					
15. Calculate your current monthly income for the year. Follow these steps: 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year).	13d.	Total	\$_		0.00 co	py here=> 13d.	- 0.0	0
15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year).	14. Your curr	ent monthly income. Subtract line 13d from line 12.				14.	\$5,555.78	
Multiply line 15a by 12 (the number of months in a year).	15. Calculate	your current monthly income for the year. Follow th	ese steps:	_	_			
Multiply line 15a by 12 (the number of months in a year).	15a. Cop	by line 14 here=>				15a.	\$5,555.78	
						-	x 12	
15b. The result is your current monthly income for the year for this part of the form.		(iii)					A 12	7
Tob. The result is your current monthly moonle for the your for this part of the form.	15b. The	result is your current monthly income for the year for th	is part of the for	m.		15b.	\$ 66,669.36	

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Delgar Sylvester Ford Case number (if known) Debtor 1 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. 16b. Fill in the number of people in your household. 2 50,679.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 22C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 22C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. §1325(b)(4) 18. Copy your total average monthly income from line 11. 18. \$ 5,555.78 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13d. If the marital adjustment does not apply, fill in 0 on line 19a. 19a.-\$ 0.00 5,555.78 Subtract line 19a from line 18. 19b. 20. Calculate your current monthly income for the year. Follow these steps: 5,555.78 20a. 20a. Copy line 19b Multiply by 12 (the number of months in a year). 12 66,669.36 20b. The result is your current monthly income for the year for this part of the form 20b. 50.679.00 20c. Copy the median family income for your state and size of household from line 16c 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment* period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: Sign Below By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Delgar Sylvester Ford **Delgar Sylvester Ford** Signature of Debtor 1 Date March 18, 2015 MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 22C-2.

If you checked 17b, fill out Form 22C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Fill in this info	mation to identify your case:		
Debtor 1	Delgar Sylvester Ford		
Debtor 2 (Spouse, if filing)		
United States B	ankruptcy Court for the: District of South Carolina		
Case number (if known)		□ Check if	f this is an amended filing
Official Form 22 Chapter	<u>c-2</u> 13 Calculation of Your Disposable	Income	12/14
	orm, you will need your completed copy of <i>Chapter 13 Stater</i> eriod (Official Form 22C-1).	ment of Your Current Monthly in	come and Calculation of
space is neede	and accurate as possible. If two married people are filing to d, attach a separate sheet to this form, Include the line numb s, write your name and case number (if known).		
Part 1: Cal	culate Your Deductions from Your Income		
the question	Revenue Service (IRS) issues National and Local Standards s in lines 6-15. To find the IRS standards, go online using th may also be available at the bankruptcy clerk's office.	•	
expenses if the	spense amounts set out in lines 6-15 regardless of your actual except are higher than the standards. Do not include any operating on onot deduct any amounts that you subtracted from your spouse.	expenses that you subtracted from	income in lines 5 and 6 of Form
If your expen	ses differ from month to month, enter the average expense.		
Note: Line nu	mbers 1-4 are not used in this form. These numbers apply to info	ormation required by a similar form	used in chapter 7 cases.
5. The nui	nber of people used in determining your deductions from inc	come	
plus the	e number of people who could be claimed as exemptions on your number of any additional dependents whom you support. This nuber of people in your household.		2
National Sta	ndards You must use the IRS National Standards to an	swer the questions in lines 6-7.	
	lothing, and other items: Using the number of people you enter	ed in line 5 and the IRS National	\$ 1,092.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

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\$ <u>60</u>
xo
\$ 0.00 Copy line 7c here=> \$ 0.00
\$ 144 _
X2
\$ 288.00 Copy line 7f here=> \$ 288.00
\$\$ Copy total here=> 7g. \$8
ds to answer the questions in lines 8-15.
rogram has divided the IRS Local Standard for housing for
ses
stee Program chart. To find the chart, go online using the link specified in the
o be available at the bankruptcy clerk's office. xpenses: Using the number of people you entered in line 5, fill ce and operating expenses. 495.00
S:
5, fill in the dollar amount \$ 755.00
es and other debts secured by your home.
a, add all amounts that are e 60 months after you file
Average monthly payment
•
payment \$
payment
payment \$ Copy line Repeat this amount
payment \$ Copy line Repeat this amount
payment \$
district services:

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11.	Local transportation expenses: Check the number of vehic	les for whi	ch you claim an	ownershi	p or operating	expense.	
	□ 0. Go to line 14.						
	☐ 1. Go to line 12.						
	2 or more. Go to line 12.						
12.	Vehicle operation expense: Using the IRS Local Standards operating expenses, fill in the <i>Operating Costs</i> that apply for years.						488.00
13.	Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan of more than two vehicles.						
Vel	nicle 1 Describe Vehicle 1: 1999 Lincoln Navigator nadaguides.com	4WD Mil	eage: 138k V	alue bas	sed on		
13a.	Ownership or leasing costs using IRS Local Standard		13a.	\$	517.00		
13b.	Average monthly payment for all debts secured by Vehicle 1.						
	Do not include costs for leased vehicles.						
	To calculate the average monthly payment here and on line 1 are contractually due to each secured creditor in the 60 mont bankruptcy. Then dived by 60.						
	Name of each creditor for Vehicle 1	Average payment					
	Santander Consumer Usa	\$	834.00				
	Sumter Financial Services	\$	12.00				
		- · 	Copy 13	_		Repeat this amount	
120	Not Vahiala 1 augustahin at lagga aynanga		here =>	-Φ	0.000	on line 33b. Copy net	
136.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this amount is less than \$0,	enter \$0.				Vehicle 1 expense	
	•	•	13c.	\$	0.00	here => \$	0.00
Vel	nicle 2 Describe Vehicle 2: 2014 Ford Mustang Coo				ue based	_	
13d.	Ownership or leasing costs using IRS Local Standard	1. 12101	13d.	\$	517.00		
	Average monthly payment for all debts secured by Vehicle 2.	Do not inc		· —	011100		
	leased vehicles.	201.011.0					
	Name of each creditor for Vehicle 2	Average payment					
	Sumter Financial Services	\$	12.00				
	Wff Auto	\$	541.00				
			Copy 13e		553.00		
13f.	Net Vehicle 2 ownership or lease expense			=		Copy net	
	Subtract line 13e from line 13d. if this number is less than \$0,	enter \$0.			0.00	Vehicle 2 expense	
			13f.	\$	0.00	here => \$	0.00
	5.17				1 60 : 4]	
14.	Public transportation expense: If you claimed 0 vehicles in <i>Transportation</i> expense allowance regardless of whether you				ras, till in the	Ривііс \$	0.00
15.	Additional public transportation expense: If you claimed 1	or more v	ehicles in line 1	1 and if yo	ou claim that y	ou may	
	also deduct a public transportation expense, you may fill in w not claim more than the IRS Local Standard for <i>Public Transp</i>		ieve is the appr	ropriate ex	cpense, but yo	ou may \$	0.00
	Turio					· 	

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Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.				
16.	self-employment taxes, social sec your pay for these taxes. However	that you will actually pay for federal, state and local taxes, such as income taxes, curity taxes, and Medicare taxes. You may include the monthly amount withheld from ir, if you expect to receive a tax refund, you must divide the expected refund by 12 to total monthly amount that is withheld to pay for taxes.	\$	72.98
17			· —	
17.	contributions, union dues, and uni	al monthly payroll deductions that your job requires, such as retirement iform costs. not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	filing together, include payments t	y premiums that you pay for your own term life insurance. If two married people are that you make for your spouse's term life insurance. nsurance on your dependents, for a non-filing spouse's life insurance, or for any form	\$	7.80
19.	Court-ordered payments: The to administrative agency, such as sp	otal monthly amount that you pay as required by the order of a court or cousal or child support payments.		
	Do not include payments on past	due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	as a condition for your job, or	ount that you pay for education that is either required:	\$	0.00
21.	Childcare: The total monthly amo	bunt that you pay for childcare, such as babysitting, daycare, nursery, and preschool. elementary or secondary school education.	\$	0.00
22.	that is required for the health and by a health savings account. Inclu	s, excluding insurance costs: The monthly amount that you pay for health care welfare of you or your dependents and that is not reimbursed by insurance or paid ude only the amount that is more than the total entered in line 7. health savings accounts should be listed only in line 25.	\$	0.00
23.	for you and your dependents, such phone service, to the extent neces income, if it is not reimbursed by y Do not include payments for basic	one services: The total monthly amount that you pay for telecommunication services that a pagers, call waiting, caller identification, special long distance, or business cell ssary for your health and welfare or that of your dependents or for the production of your employer. It home telephone, internet and cell phone service. Do not include self-employment d on line 5 of Official Form 22C-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses allowed Add lines 6 through 23.	d under the IRS expense allowances.	\$	3,198.78
Add	ditional Expense Deductions	These are additional deductions allowed by the Means Test.		
	1	Note: Do not include any expense allowances listed in lines 6-24.		
25.		urance, and health savings account expenses. The monthly expenses for health and health savings accounts that are reasonably necessary for yourself, your spouse, or		
	Health insurance	\$0.00_		
	Disability insurance	\$0.00_		
	Health savings account	+ \$		
	Total	\$ Copy total here=>	\$	0.00
	Do you actually spend this total ar No. How much do you actu			
	Yes	\$		
26.	continue to pay for the reasonable	care of household or family members. The actual monthly expenses that you will e and necessary care and support of an elderly, chronically ill, or disabled member of ur immediate family who is unable to pay for such expenses.	\$	0.00
27.		nce. The reasonably necessary monthly expenses that you incur to maintain the er the Family Violence Prevention and Services Act or other federal laws that apply.		
	By law, the court must keep the na	ature of these expenses confidential.	\$	0.00

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28.	Additional home energy costs. Your hom allowance on line 8.	ne energy costs are included in your non-mortgage	e housing and utilities		
		osts that are more than the home energy costs incce, then fill in the excess amount of home energy			
	You must give your case trustee document amount claimed is reasonable and necessary	ation of your actual expenses, and you must show ary.	v that the additional	\$	0.00
29.	Education expenses for dependent child \$156.25* per child) that you pay for your depublic elementary or secondary school.	dren who are younger than 18. The monthly experience than 18 years are younger than 18 years	enses (not more than old to attend a private or		
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explant already accounted for in lines 6-23.	ain why the amount		
	* Subject to adjustment on 4/01/16, and evo	ery 3 years after that for cases begun on or after the	he date of adjustment.	\$	0.00
30.		he monthly amount by which your actual food and g allowances in the IRS National Standards. That a s in the IRS National Standards.			
		ional allowance, go online using the link specified so be available at the bankruptcy clerk's office.	in the separate		
	You must show that the additional amount	claimed is reasonable and necessary.		\$	0.00
31.	Continuing charitable contributions. The instruments to a religious or charitable organization	e amount that you will continue to contribute in the anization. 11 U.S.C. § 548(d)3 and (4).	form of cash or financial	\$_	120.00
32.	Add all of the additional expense deducted Add lines 25 through 31.	tions		\$	120.00
Ded	uctions for Debt Payment				
	For debts that are secured by an interest oans, and other secured debt, fill in lines	in property that you own, including home more 33a through 33g.	tgages, vehicle		
	To calculate the total average monthly paym creditor in the 60 months after you file for ba	ent, add all amounts that are contractually due to nkruptcy. Then divide by 60.	each secured		
	Mortgages on your home			Averag	e monthly nt
33a.	Copy line 9b here		=>	\$	0.00
	Loans on your first two vehicles				
33b.	Copy line 13b here		=>	\$	846.00
33c.				\$	553.00
Nam	e of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?		
33d.	American General Financial/Springleaf Fi	Various used household goods and furnishings Location: 850 S Harvin St, Sumter, SC 29150	■ No □ Yes	\$	36.16
33e.	World Fin	Various used household goods and furnishings Location: 850 S Harvin St, Sumter, SC 29150	■ No □ Yes	\$ \$	16.72
JJ U .		20100		Ψ	<u> </u>
33f.			□ No □ Yes	+\$	
			l		

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34. Are any debts that you listed in lin or other property necessary for you						
■ No. Go to line 35.						
☐ Yes. State any amount that you listed in line 33, to keep po Next, divide by 60 and fill i	ossession of your property (c					
Name of the creditor	Identify property that secur	es the debt	Т	otal cure amount		onthly cure nount
-NONE-			\$		÷ 60 = \$	
				_	- Comu	_
			Total \$	0.00	Copy total here=>	\$
35. Do you owe any priority claims - s are past due as of the filing date o				t		
■ No. Go to line 36.						
☐ Yes. Fill in the total amount of a	all of these priority claims. Do ch as those you listed in line		urrent or			
Total amount of all past-o	due priority claims		\$	0.00	÷ 60	\$
36. Projected monthly Chapter 13 plan	n payment		\$	2,250.00	_	
Current multiplier for your district as Office of the United States Courts (for the Executive Office for United State To find a list of district multipliers that incluse separate instructions for this form. This list	or districts in Alabama and No is Trustees (for all other distri udes your district, go online using	orth Carolina) cts). g the link specif	or by X led in the	9.10	1	
Average monthly administrative expe	ense			\$	Copy total	004 ==
					Ī	\$ 1,656.63
 Add all of the deductions for deb Add lines 33g through 36. 	it payment.					1,030.03
Total Deductions from Income						
38. Add all of the allowed deductions.						
Copy line 24, All of the expenses all expense allowances	llowed under IRS	\$	3,198.78			
Copy line 32, All of the additional e.	xpense deductions	\$	120.00			
Copy line 37, All of the deductions	for debt payment	+\$	1,656.63			
Total deductions		\$	4,975.41	Copy total here=>	-	4,975.41

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Part 2: De	termine You	r Disposable Income Under 11 U.S.C. § 13	25(b)(2)						
		ent monthly income from line 14 of Form 2 Current Monthly Income and Calculation of				\$	5,555.78		
childrer disability received	ly necessary income you receive for supporty average of any child support payments, fos or a dependent child, reported in Part I of Formore with applicable nonbankruptcy law to the ended for such child.	ter care payments, or n 22C-1, that you	\$		0.00				
employe in 11 U.	etirement deductions. The monthly total of a m wages as contributions for qualified retirem (7) plus all required repayments of loans from § 362(b)(19).	nent plans, as specified	\$	(0.00				
42. Total of	42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Co				4,975	<u>5.41</u>			
43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.									
Describe the special circumstances			Amount of expe	ense					
43a			\$						
43b	43b								
43c			\$						
43d. Tot a	II. Add lines 4	3a through 43c.	\$		py 43d re=> \$	0.00			
44. Total ac	ljustments. A	Add lines 40 through 43d.	=> [S	\$	4,975.41	Copy total here=> -\$	4,975.41		
45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39.									
Part 3: Ch	ange in Inco	ome or Expenses							
reported your bar below. F 22C-1 ir	in this form hakruptcy petition for example, in the first column.	r expenses. If the income in Form 22C-1 or the nave changed or are virtually certain to change on and during the time your case will be oper of the wages reported increased after you filed mn, enter line 2 in the second column, explain the increase occurred, and fill in the amount	e after the date you filed in, fill in the information I your petition, check in why the wages	d					
Form	Line	Reason for change	Date of change		Increase or decrease?	Amount of chan	ge		
☐ 22C-1 ☐ 22C-2 ☐ 22C-1 ☐ 22C-2 ☐ 22C-1 ☐ 22C-2 ☐ 22C-1 ☐ 22C-2					☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Decrease	\$ \$ \$			

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Part 4:	Sign Below
	By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct. /s/ Delgar Sylvester Ford Delgar Sylvester Ford Signature of Debtor 1
Date	March 18, 2015
	MM / DD / YYYY

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 09/01/2014 to 02/28/2015.

Line 9 - Pension and retirement income

Source of Income: **Retirement Annuity** Constant income of **\$2,255.00** per month.

Line 9 - Pension and retirement income

Source of Income: **Veterans Benefits**Constant income of **\$3,300.78** per month.

Non-CMI - Social Security Act Income

Source of Income: SSI Benefits

Income by Month:

6 Months Ago:	09/2014	\$265.00
5 Months Ago:	10/2014	\$265.00
4 Months Ago:	11/2014	\$265.00
3 Months Ago:	12/2014	\$265.00
2 Months Ago:	01/2015	\$272.10
Last Month:	02/2015	\$272.10
	Average per month:	\$267.37

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Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 09/01/2014 to 02/28/2015.

Non-CMI - Social Security Act Income

Source of Income: SSI Benefits

Constant income of \$488.67 per month.